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| REPORTS INVENTORY | | | | | | CONTROL NO. | |
|---|-------------|--|--|--|--|-----------------------------------|---|
| PREPARE IN DUPLICATE | | | | | | | |
| 1. TITLE OF REPORT (if a fill-in report include Form No.) <div style="text-align: center;">Correspondence Workload Report</div> | | | | | 2. TYPE OF REPORT | | |
| | | | | | <input type="checkbox"/> STATISTICAL <input checked="" type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING | | |
| 3. FUNCTIONAL AREA | | <input checked="" type="checkbox"/> PERSONNEL <input type="checkbox"/> LOGISTICS <input type="checkbox"/> MEDICAL | | <input type="checkbox"/> TRAINING <input type="checkbox"/> SECURITY <input type="checkbox"/> FINANCE | | ADMIN. GENERAL OTHER (specify) | |
| 4. NO. OF COPIES PREPARED <div style="text-align: center;">2</div> | | 5. FREQUENCY (weekly, monthly, quarterly, etc.) <div style="text-align: center;">monthly</div> | | 6. DISTRIBUTION (No. of components not number of copies) <div style="text-align: center;">1</div> | | | |
| 7. FORMAT (memorandum, form computer print-out, etc) <div style="text-align: center;">memorandum</div> | | 8. ADP PROCESSING | | 9. DIRECTIVE AUTHORITY REQUIRING REPORT | | | |
| | | <input type="checkbox"/> YES IF YES GIVE ADP PROCESSING NO. <input checked="" type="checkbox"/> NO | | <div style="text-align: center;">C/SPD</div> | | | |
| 10. PREPARING COMPONENT (include lowest level contributing information to report) <div style="text-align: center;">DDS/OP/SPD/CARB</div> | | | 11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.) <div style="text-align: center;">branch weekly report</div> | | | | |
| 12. COST FACTORS | | | | | | | |
| A. MANUAL PREPARATION AND REVIEW COSTS | | | | | | | |
| GRADE | HOURLY RATE | <input checked="" type="checkbox"/> HOURS PER REPORT | = | COST PER REPORT | <input checked="" type="checkbox"/> TIMES PREPARED | = | COST PER YEAR |
| GS-04 to GS-12 | \$5.00] | 1/2 | = | \$2.50 | 12 | = | \$30.00 |
| B. COSTS OF COMPUTER PRODUCED REPORTS | | | | | | | |
| | | | | | | | |
| TOTAL COSTS PER YEAR | | | | | | | |
| 13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. | | | | | | | |
| <div style="text-align: center;">Monthly total of weekly reports.</div> | | | | | | | |
| 14. FUTURE GOALS | | | | | | | |
| GOAL PROPOSED BY COMPONENT FOR THIS REPORT | | | | | | ESTIMATED SAVINGS | |
| <input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain) | | | | | | MAN-HOURS DOLLARS | |
| <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE | | | | | | STAT | |
| 16. DATE OF INVENTORY <div style="text-align: center;">9/21/70</div> | | 17. NAME AND TITLE OF PERSON FURNISHING INFORMATION <div style="text-align: center;">Approved For Release 2006/11/13 : CIA-RDP75-00399R000100160117-1 DD/Pers/R&P</div> | | | | | 18. EXTENSION <div style="text-align: center;">[]</div> |

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